Total	•	20	Minus	•• 6	10	•	
Independent	• •	3	Minus	***	3	-O	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							
		•					

FORM PTO-575 (Rev. 8/00)

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE 41.E. GPO: 2000-480-70400103

OR

OR

OR

X40=

+135=

ADDIT. FEE

1/101

X80=

+270=

ADDIT FEE

TOTAL

 $^{^{\}circ}$ If the entry in column 1 is less than the entry in column 2, write $^{\circ}$ 0° in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.